SEP 0 9 2005

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The state of the s		Complete If Known						
TRANSMITTAL	App	Application No.			10/730,94	10/730,942		
TRANSMITTAL			Filing Date			December 10, 2003		
[MAIL STOP - AMENDMENT]		First Named Inventor			Kiyoshi Terauchi et al.			
		Examiner Name			Michael S. Leslie			
	Gro	Group Art Unit			3745			
Total Amount Of Payment (\$) 1,020.00		<u></u>	Docket No		018842.1	018842.1285		
METHOD OF PAYMENT (check one)	1				TION (conti	ION (continued)		
1. The Commissioner is hereby authorized to			3. ADDITIONAL FEES					
charge indicated fees and credit any over	er Fee t	Fee Description					Fee Paid	
payments to Deposit Account No. 02-037 in the name of Baker Botts L.L.P.	5 🗆	☐ Surcharge - late filing fee or oath					\$	
		□ Surcharge - late provisional filing fee or cover sheet						
Charge any additional fee required under 37			⊠ Extension for reply with 3 month \$ 1,020.0					
C.F.R. §§ 1.16 and 1.17 to Deposit Account No. 02-0375.		□ Notice of Appeal				\$		
		☐ Filing Brief in Support of Appeal				\$		
2. X Check Enclosed. The Commissioner	·	Request for Oral Hearing					\$	
hereby authorized to charge any variant between the amount enclosed and the Pate	أند	Utility Issue Fee (or reissue)				\$ \$		
Office charges to Deposit Account No. 0	2- 🗒	☐ Design Issue Fee☐ Plant Issue Fee			\$			
0375 in the name of Baker Botts L.L.P, Th	ıe _		ons to Comm	nissioner		\$		
Warner, Suite 1300, 1299 Pennsylvan Avenue, N.W., Washington, D.C. 20004-240	ıa						\$	
, (vo.) (co.) (vo.) (vo.) (vo.) (co.) (co.		☐ Petition to Revive (unintentional)						
FEE CALCULATION		☐ Petitions Related to Provisional Applications						
1. BASIC FILING FEE X Large Entity Small Entity	/ -	☐ Submission of Information Disclosure \$ Statement						
Fee Paid		☐ Filing Submission After Final Rejection					\$	
Utility Filing Fee \$		☐ Recordation of Assignment Document \$						
Design Filing Fee \$ Plant Filing Fee \$ Reissue Filing Fee \$		☐ Filing Request for Rea			nination \$			
Reissue Filing Fee \$ Provisional Filing Fee \$		Othe	r (specify) Ad	dvanced	Patent Copies	nt Copies \$		
2. EXTRA CLAIMS FEES								
CLAIMS A	S AMEN	NDED						
Highest Nur			Rate					
For Number Present Paid Fo	· E	xtra	Large En		Small Entity		mount	
TOTAL CLAIMS 20		0	x \$ 50.00		x \$ 25.00	\$0.00		
INDEPENDENT CLAIMS 3		0	x \$ 200.0		x \$ 100.00	\$0.00 \$0.00		
MULTIPLE DEPENDENT CLAIMS		\$ 360.00			\$ 180.00	\$0.00		
TOTAL EXTRA CLASSINS FEES		Complete			Complete (ii			
SUBMITTED BY Typed or Printed Name James B. Argin				Regio	Complete (if applicable) tration No. 33,470			
Typed or Printed Name James B Argin	te Sen	tembe	er 9, 2005		sit Account User ID 02-0375			
Signature	Seb	nembe	3, 2003	Веро	Sit / toooding of	301 12	02 00.0	